NOTICE OF FEE DUE

DATE:	01-16-	02	
TO:	09/809	399	·
FROM:	Office of Initial Patent Exam	ination	
SUBJECT:		/	
APPLICAT	ION NUMBER: 9	1/809	1399
Office for the authorization	for the attached document su e following reason. Please cl n to charge a deposit account. opropriate fee. If an authoriza iency.	neck the application If an authorization	on for the appropriate
V			
Insufficie	ent fee by check		
□ Insufficie	nt funds in deposit account		· .
□ Declined	credit card		
□ Non authorization for charge to deposit account			
□ No fee sul	omitted per requirement		
The correct fe	ee code: 2252	amount	\$ 205
The suspende	d fee code: 197	amount	-s 200
Fee Due		amount	=\$
If you have any questions, please contact Cynthia Streater at 703-306-5430 or Eleanor Kurtz at 703-308-3642.			
Terminal Oper	ator	nom	· · · · · · · · · · · · · · · · · · ·